PATENT APPLICATION FEE DETERMINATION RECOR	D
Effective December 29, 1999	

Application or Docket Number

Elicolito Decelibel 23, 1000										<u> </u>		9 1 -	
		CLA	IMS AS FILED - PA (Column 1)			ART I (Column 2)			ALL PE	ENTITY	OR	OTHER SMALL	
FOR			NUMBE	R FILED]	NUMBER	EXTRA	R/	ΤE	FEE	1	RATE	FEE
BA	SIC FEE							H		345.00	OR		690.00
TOTAL CLAIMS 10 7 minus 20=								X\$	9=		OR	X\$18=	
├	DEPENDENT CL		_2	minus	3 =	•		X3	19=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT								. +1:	30=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2							ТО	TAL	345	OН	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SM	ALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A	5/21/07	REM.	AIMS AINING TER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N Q N	Total	•	7_	Minus	••	20	= 1	X\$	9=		OR	X\$18=	
AME	Independent	NITATIC	2	Minus) ENG		= ()	ХЗ	9=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+13	30=		OR	+260=	
									OTAL FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)									. / LL		•	ADDII. I CL	
AMENDMENT B		CL REMA	AIMS AINING TER DMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	. RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•		Minus	••		=	X\$	9=		OR	X\$18=	
	Independent	·	N 05 M	Minus	***		=	ХЗ	9=		OR	X78=	
┝	FIRST PRESE	NIAIIC	IN OF MI	JUIIPLE DEI	PENL	JENT CLAIM		+13	0=		OR	+260=	
							•	ADDIT.	OTAL FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		REM/	AIMS AINING TER DMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	٠		Minus	••		=	X\$	9= ·	·	OR	X\$18=	
	Independent			Minus	***		=	X3:	<u></u>			X78=	
Ľ	FIRST PRESE	NTATIO	N OF M	JLTIPLE DEF	PENC	ENT CLAIM					OR	7/0-	
	If the entry in colu	mn 1 is la	ess than th	e entry in colu	ımn 2	write "O" in ~	lumn 3	+13			OR	+260=	
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE TOTAL ADDIT. FEE TOTAL ADDIT. FEE TOTAL ADDIT. FEE ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE ADDIT. FE													